

**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN  
APPLICATION DATA SHEET (37 CFR 1.76)**

Electronic Version v11

Stylesheet Version v10

**Title of  
Invention**

SCREENING APPARATUS AND METHOD, OLFACTORY  
MUCOSA STIMULATING COMPOUND OBTAINED BY  
SCREENING METHOD, THERAPEUTIC APPARATUS, AND  
MEASURING ELECTRODE PORTION

As the below named inventors, we declare that:

This declaration is directed to the invention titled: " SCREENING APPARATUS AND  
METHOD, OLFACTORY MUCOSA STIMULATING COMPOUND OBTAINED BY  
SCREENING METHOD, THERAPEUTIC APPARATUS, AND MEASURING ELECTRODE  
PORTION"

We believe that we are the original and first inventors of the subject matter which is claimed  
and for which a patent is sought;

We have reviewed and understand the contents of the above-identified application, including  
the claims, as amended by any amendment specifically referred to above;

We acknowledge the duty to disclose to the United States Patent and Trademark Office all  
information known to us to be material to patentability as defined in 37 CFR 1.56, including for  
continuation-in-part applications, material information which became available between the  
filing date of the prior application and the national or PCT International filing date of the  
continuation-in-part application.

All statements made herein of own knowledge are true, all statements made herein on  
information and belief are believed to be true, and further that these statements were made  
with the knowledge that willful false statements and the like are punishable by fine or  
imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the  
application or any patent issuing thereon.

**FULL NAME OF INVENTORS:**

Inventor 1: Hiroaki OKA	Inventor
Signature : /HO	Citizen of : JP
Inventor 2: Ryuta OGAWA	Inventor

	Signature : /RO	Citizen of : JP
	Inventor 3: Tetsuo YUKIMASA	Inventor
	Signature : /TY	Citizen of : JP

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (12/97)

Approved for use through 9/30/00. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)	<b>Attorney Docket Number</b>	29288.5400
	<b>First Named Inventor</b>	Hiroaki OKA
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	To be assigned
	<b>Filing Date</b>	March 5, 2002
	<b>Group Art Unit</b>	To be assigned
	<b>Examiner Name</b>	To be assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SCREENING APPARATUS AND METHOD, OLFACTORY MUCOSA STIMULATING COMPOUND OBTAINED  
BY SCREENING METHOD, THERAPEUTIC APPARATUS, AND MEASURING ELECTRODE PORTION**

the specification of which (Title of the invention)

☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) 06/25/2001 as United States Application Number or PCT International

Application Number PCT/JP01/05426 and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above:

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
2000-204411 PCT/JP01/05426	Japan PCT	07/05/2000 06/25/2001	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## DECLARATION ---- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/JP01/05426	06/25/2001	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transmit all business in the Patent and Trademark Office connected therewith:

☒ Customer Number 20322

Place Customer Number Bar Code Label here

☐ OR Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 20322 OR ☐ Correspondence address below

Name	Michael K. Kelly				
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Address	One Arizona Center, 400 E. Van Buren Street				
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Country	USA	Telephone	602-382-6291	Fax	602-382-6070

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

☐ A petition has been filed for this unsigned inventor

Name of Sole or First Inventor:		
Given Name (first and middle (if any))	Family Name or Surname	
Hiroaki	OKA	

Inventor's Signature	Hiroaki OKA			Date	9/6/02
Residence: City	Hirakata	State	Osaka	Country	Japan
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City	Hirakata	State	Osaka	ZIP	573-1194
				Country	Japan

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Ryuta				OGAWA			
Inventor's Signature	<i>Ryuta Ogawa</i>					Date	2/12/02
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Post Office Address Moriguchi-shi, Osaka Japan							
City	Moriguchi	State	Osaka	ZIP	574-0031	Country	Japan
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Tetsuo				YUKIMASA			
Inventor's Signature	<i>Tetsuo YUKIMASA</i>					Date	2/7/02
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Post Office Address Hirakata-shi, Osaka Japan							
City	Hirakata	State	Osaka	ZIP	573-1122	Country	Japan
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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